

**Town of Dighton**  
**Signature Authority Designation for Expenditures**  
**Members Elected / Appointed for Fiscal Year \_\_\_\_\_**

BOARD – COMMITTEE: \_\_\_\_\_

Please list the names of your **Full Board/Committee** below:

If you choose, you **may** designate one person to sign your department payroll/warrants. That designated person **must** sign below on the appropriate line; otherwise the majority of the board/committee **MUST** sign all bills and payrolls.

AUTHORIZED TO SIGN **PAYROLL** – IF – OTHER THAN MAJORITY OF BOARD/COMMITTEE (YOUR CHOICE)

**PRIMARY(S)** \_\_\_\_\_

**ALTERNATE(S)** \_\_\_\_\_ **PRINT** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**AUTHORIZED TO SIGN WARRANTS – IF – OTHER THAN MAJORITY OF BOARD/COMMITTEE (YOUR CHOICE)**

**PRIMARY(S)** \_\_\_\_\_ **PRINT** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**ALTERNATE(S)** \_\_\_\_\_